## IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE IN AND FOR NEW CASTLE KENT SUSSEX COUNTY

In the Matter of:	C.M.#		
AN ALLEGED DISABLED PERSON			
AFFIDAVIT OF MAILING			
BE IT REMEMBERED,	, that:		
1. The Petitioner,	, mailed on this date with		
postage prepaid a letter dated	to the person(s) set forth in paragraph 2 informing		
them of the Hearing in this matter	that is scheduled for this date		
2. The person(s) to whom the letter above was mailed and their addresses are:			
Name	Address		

3.	ATTACHED ARE: (Check both	h statements below to acknowledge both are attached.)	
	A copy of the above re	eferenced letter AND	
	☐ The certified mail return receipts.		
	Date	Petitioner's Signature	
SWORN TO AND SUBSCRIBED before me on this date			
		Notary Public or Clerk of the Court	